7	OPERS
6	MAY C 6 2000 B
B	Under the Da

R CE (3763)

PTO/SB/30 (10-p1)
Approved for use through 10/31/2002. OMB 0651-0931
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
work Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRADEMA REQUEST

CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to: **Commissioner for Patents Box RCE** Washington, DC 20231

	displays a valid citiz control mengal	
Application Number	09/495,005	1
Filing Date	January 31, 2000	
First Named Inventor	Christopher R. Cl	ır.e.
Art Unit	3763	
Examiner Name	Roz Ghafoorian	11
Attorney Docket Number	GYN-032	1 17

This is a Request for Request for Continued Ex 1995, or to any design ap	camination (RCE) pract	ctice under 37 CFR 1.1	14 does not a	apply to any	utility or plant a	application filed	application orior to June &	5/13
							/1	5 //
1. Submission requ	uired under 37 CF	R 1.114					#1	3/2
'· 🖳 (Any unen	er the amendment stered amendment(s) refe	at(s)/reply under 37 erred to above will be ente in the Appeal Brie	red).				C 37	- H
i. 🔯 Amendı	ment/Reply it(s)/Declaration(s	•		nformatio	n Disclosure	Statement (II		4
Miscellaneous Suspension period of b. Other	of action on the	above-identified ap	oplication is	requeste	ed under 37 C Fee under 37 CFR	CFR 1.103(c) 1.17(i) required)	2 2003 AIL R BOM	The Man
a. X The Director	or is hereby autho				redit any ove	rpayments, to	•	
	e required under	37 CFR 1.17(e)		05	7/07/2003 MGEI	REM1 0000009	7 191218 0	9495005
^{ii.} ⊠ Extensi iii. □ Other	on of time fee (37	CFR 1.136 and 1.17)	\$110.0	0 01	FC:1801	750.00 CH		
b. Check in th	e amount of \$		enciose	1		******		
_			611010301	4				
c. Payment by credit card (Form PTO-2038 enclosed) WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
	SIGNATU	RE OF APPLICANT	, ATTORNE	Y, OR AG	ENT REQUIR	ED		
Name (Print /Type)	Paul F, S	wift		Registra	ation No. (Attorn	eylAgent) 34	,938	
Signature	6 au	10 Su	278	Date	4/29	103		
		RTIFICATE OF MA						
I hereby certify that this co envelope addressed to: Co Office on the date shown	ommissioner For Pate	g deposited with the Uents, Box RCE, Washin	nited States F gton, DC 202	Postal Servi 31, or facsin	ce with sufficien mile transmitted	t postage as frsi to the U.S. Pate	t class mail in a int and Tradem	en nark
Name (Print/Type)	Ronn	o. O.Con	0-	.,				
Signature	Form	O Conor		Date	apri	l 29,	2003	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Assistant Commissioner for Patents, Box RCE, Washington, DC 20231.